

evening, we could stack votes early in the morning and have a departure which would not be too late to accommodate the schedules of many Members who would like to understandably depart going back to their home States.

RECOGNITION OF THE ACTING MINORITY LEADER

The PRESIDENT pro tempore. The assistant Democratic leader.

Mr. REID. Mr. President, I say through you to the manager and distinguished majority leader that we are going to cooperate in every way we can to move this most important piece of legislation. We have eight appropriations bills and a short time to complete them. We will do the best we can to wrap them up as soon as possible.

Mr. FRIST. Mr. President, if I could ask that a few minutes be devoted to accommodate the Senator from Texas with comments on the guest Chaplain.

The PRESIDENT pro tempore. The Senator from Texas is recognized.

PASTOR MAX LUCADO

Mr. CORNYN. Mr. President, I appreciate the indulgence of the majority leader, the bill's managers, and Senator NELSON and Senator REID. Before we get on to the business of the day today, I wish to say a couple of words about our guest Chaplain, Max Lucado, who opened the Senate with prayer this morning.

Max is a longtime friend of mine and our family and is the minister of the Oak Hills Church in San Antonio. He has a wonderful wife, Denalyn, and he is a loving father to their children: Jenna, Andrea, and Sara.

Most people will know Max because of his best-selling books. Currently, he has more than 33 million books in print, and is America's leading inspirational author.

A half century ago, Dietrich Bonhoeffer wrote about the difference between "cheap grace" and "costly grace" when it comes to our faith. Cheap grace, he said, requires nothing of us but vague sentiment—but costly grace requires a lifetime of faithful sacrifice and service.

Someone who understands and embraces that kind of costly grace with a whole heart is a true disciple. By that definition, Max Lucado is a man who exemplifies what a disciple is and can be.

I thank Max for his service to Texas, to America, and today to the Senate, and also to his Creator who chose to set a disciple like him among us for such a time as this.

Thank you, Mr. President. I yield the floor.

RESERVATION OF LEADER TIME

The PRESIDENT pro tempore. Under the previous order, leadership time is reserved.

DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2004

The PRESIDENT pro tempore. Under the previous order, the Senate will resume consideration of H.R. 2660, which the clerk will report by title.

The legislative clerk read as follows:

A bill (H.R. 2660) making appropriations for the Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2004, and for other purposes.

Pending:

Specter amendment No. 1542, in the nature of a substitute.

Byrd amendment No. 1543 (to amendment No. 1542), to provide additional funding for education for the disadvantaged.

Akaka amendment No. 1544 (to amendment No. 1542), to provide funding for the Excellence in Economic Education Act of 2001.

Mikulski amendment No. 1552 (to amendment No. 1542), to increase funding for programs under the Nurse Reinvestment Act and other nursing workforce development programs.

The PRESIDENT pro tempore. The Senator from Florida is recognized.

AMENDMENT NO. 1557 TO AMENDMENT NO. 1542

Mr. NELSON of Florida. Mr. President, I send to the desk an amendment.

The PRESIDENT pro tempore. Is there an objection to setting aside the pending amendments? If not, without objection, it is so ordered.

The clerk will report.

The legislative clerk read as follows:

The Senator from Florida [Mr. NELSON] proposes an amendment numbered 1557.

Mr. NELSON of Florida. Mr. President, I ask unanimous consent that reading of the amendment be dispensed with.

The PRESIDENT pro tempore. Without objection, it is so ordered.

The amendment is as follows:

(Purpose: To provide for a study and report on the propagation of concierge care)

On page 61, between lines 14 and 15, insert the following:

SEC. ____ GAO STUDY AND REPORT ON THE PROPAGATION OF CONCIERGE CARE.

(a) STUDY.—

(1) IN GENERAL.—The Comptroller General of the United States shall conduct a study on concierge care (as defined in paragraph (2)) to determine the extent to which such care—

(A) is used by Medicare beneficiaries (as defined in section 1802(b)(5)(A) of the Social Security Act (42 U.S.C. 1395a(b)(5)(A))); and

(B) has impacted upon the access of Medicare beneficiaries (as so defined) to items and services for which reimbursement is provided under the Medicare program under title XVIII of the Social Security Act (42 U.S.C. 1395 et seq.).

(2) CONCIERGE CARE.—In this section, the term "concierge care" means an arrangement under which, as a prerequisite for the provision of a health care item or service to an individual, a physician, practitioner (as described in section 1842(b)(18)(C) of the Social Security Act (42 U.S.C. 1395u(b)(18)(C))), or other individual—

(A) charges a membership fee or another incidental fee to an individual desiring to receive the health care item or service from

such physician, practitioner, or other individual; or

(B) requires the individual desiring to receive the health care item or service from such physician, practitioner, or other individual to purchase an item or service.

(b) REPORT.—Not later than the date that is 18 months after the date of enactment of this Act, the Comptroller General of the United States shall submit to Congress a report on the study conducted under subsection (a)(1) together with such recommendations for legislative or administrative action as the Comptroller General determines to be appropriate.

Mr. NELSON of Florida. Mr. President, this is an amendment that I think is noncontroversial, that I am led to believe will be accepted by both sides. It calls for a study by the GAO of a practice that is going on in health care today that I have considerable concerns with, which could cause the beginning of the demise of a major part of Medicare, which is our health insurance system provided by the Federal Government for senior citizens.

The practice, interestingly, started in my State of Florida. It has spread to other States. We do not know the extent of this practice. That is one of the reasons for the GAO study that would take place over the next year and a half.

But here is what happens: Let's say a doctor has a patient list of some 3,000 patients, and the doctor wants to restrict his or her practice. So the doctor writes all of the patients—and what I am recounting right now is in fact what has happened in Florida—the doctor writes all of the patients and says: Henceforth, I am going to limit my practice. If you want to continue with me, you must pay an entrance fee of \$1,800 per year. In some cases it has been noted in articles that have appeared in periodicals such as the Los Angeles Times, the Washington Post, and the New York Times that that entrance fee is as high as \$20,000 per patient.

So what happens is, patients who have enjoyed the services of that physician in the physician-patient relationship, and who cannot afford the entrance fee, suddenly have to go elsewhere to seek their health care services.

You may say: Well, that sounds reasonable because we ought to have the opportunity for individuals to charge what they want for the services they provide as a physician. And, of course, that is our free market system way of doing things. But when part of the equation is a health insurance system funded by the Federal Government for senior citizens, and the doctor wants to continue to receive reimbursement by that health insurance system called Medicare, and the doctor is limiting the access of patients with an entrance fee which that patient must pay, then what we start to create under Medicare is a two-tier system of those who can afford it and those who cannot. It was never contemplated that is what Medicare would be.